

Collaboration and Collegiality **Building Capacity, Leveraging Resources, Sharing Expertise**

As a powerful tool to foster collaboration among stakeholders and encourage partnerships among USAID cooperating agencies, the Performance Improvement (PI) approach realized many facets of its potential for application during the past year. PRIME II has provided the expertise and practical experience for a range of PI-based achievements around the world; we've created consensus for an FP/RH framework on the country level, effectively coordinated technical assistance activities, and helped make more efficient use of national and donor dollars. Moreover, the process has generated essential information to facilitate policy dialogue, speed implementation, design relevant training, supervisory and non-training interventions, and modify service delivery strategies so they respond more effectively to client needs.

Selected Interventions

Over the past year, application of the PI approach spread across Africa.

- *In Tanzania*, PRIME II successfully introduced PI as the technical framework to build FP/RH training and supervision capacity of Zonal Training Centers, and to assist the Reproductive and Child Health Section (RCHS) in finalizing RH guidelines and implementing strategies for PAC expansion. PI proved critical in facilitating consensus among RCHS staff on workplans and among CAs to coordinate TA.
- *In the East and Southern Africa Region*, PRIME II partnered with the Regional Center for Quality of Health Care (RCQHC) at Makerere University in Uganda to develop indigenous PI capacity. In doing so, PRIME assisted the Center to design, market and conduct a one-week ESA PI Introductory Short Course. PRIME's vision for this application-based course included institutionalizing PI at the Center through capacity building as a conduit for cultivating a critical mass of PI practitioners in the region. A later step strengthened the network of ESA regional institutions applying the PI strategy by establishing a one-on-one mentoring relationship with selected students as they integrated the PI approach in their programs and began interventions generated by PI. PRIME II is following these activities closely, with a particular emphasis on the non-training interventions, to evaluate which ones work well, and under what circumstances they prove successful.
- *In Senegal*, USAID asked PRIME II to introduce PI into many of its FP/RH programs, including activities implemented by

Reviewing Results in PRIME II

Case Studies from:

- El Salvador
- Uganda
- Kenya
- Bangladesh
- India
- Rwanda
- Ghana
- Benin
- HIV/AIDS Integration
- **PI Global Partnerships**

PRIME II

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MSH, EngenderHealth, Population Council, JHPIEGO and Africa Consultants International. PRIME II built capacity within the region to do performance work and led two PI short-courses with follow-up TA to 57 participants representing staff from USAID CAs, MOHs and NGOs in Senegal, Mali, Guinea, and Rwanda. Again, PRIME's continuing work will emphasize mentoring participants as they begin their own PI work and evaluating the non-training interventions they identify and implement.

Results

- Within a health care system that is undergoing decentralization, the PI process quickly obtained the buy-in of Tanzanian stakeholders on the technical direction for FP/RH programs. Working with data from three performance needs assessments, efforts in 16 districts established a common vision of performance standards among MOH officials and district level providers. The resulting district action plans reflect on-the-ground realities, making training and non-training interventions much more likely to succeed in improving the quality of FP/RH services by primary providers. MOH staff also adapted findings from the PNAs to finalize RCHS guidelines and trainer standards.
- Efforts at global partnering expand the application of PI. PRIME II partnered with BASICS, JHPIEGO, MSH, Population Council and other agencies in Senegal and the West Africa region to apply PI in IMCI, community-based FP and PAC programs. Similarly, a partnership with Tulane University introduces PI to the newly created Institute for Health and Development housed in the Public Health School at the University of Dakar.
- In East and Southern Africa, PRIME has leveraged organizational resources to broaden the region-wide application of PI. Through regional one-week courses, RCQHC introduced PI to 27 senior-level health managers from Kenya, Uganda, Tanzania, Angola, Eritrea and Zambia. Active PI resource teams have been created in Tanzania, Kenya and Uganda. Health institutions in Tanzania and Kenya have specifically endorsed PI methodologies to achieve improvements in RCH service quality. PRIME II is pursuing opportunities for follow-up and mentoring of PI country resource teams, expanded course offerings and regional exchanges, and valuable experiences tracking non-training interventions.

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